. гн	TENT APPLI	CATION I	FEE DETERI October 1, 2	MINATION I	RECORD	A	Pplicatio	or Doc	ket Nun	nber
		09/763194								
TOTAL CLAIMS			LED - PART Column 1)	(Column 2)	1	MALL EN	L ENTITY OF		OTHER THAN SMALL ENTITY	
FOR			JMBER FILED	NUMBER EXT		RATE	FEE	,	RATE	FEE
11	TOTAL CHARGEABLE CLAIMS		tninus 20=	*		ASIC FEE		OR BA	IC FEE	740.00
INDEPENDENT CLAIMS			minus o			X\$ 9=		OR X	\$18=	
MULTIPLE DEPENDENT CLAIM PR					7	X42=		OR X	84=	
* If the diffe	Prenoe in column	1 1 is less th	ian zero, enter DED - PART	"0" in column 2		1140= OTAL		L	80= Tot	
Total Independ	CLAIM REMAINI AFTER AMENDME	NG Minus	(Columi Highes NUMBE PREVIOU PAID FO	n 2) (Column ST ST PRESEN EXTRA	13) S	MALL EN ATE TIC	DDI- DMAL EE	OT	HER THALL ENT	IAN III'Y DOI- MAL EEE
	RESENTATION OF		DEPENDENT CL	LAIM	+14	ØTAI	OF	4280	₹	
Total Independen		Minus	(Column : HIGHEST NUMBER PREVIOUSL PAID FOR	Y PRESENT EXTRA	RAT	ADE TION FEI	DI- IAL	RATE X\$18=	ADI TION FEI	IAL
Lival PHE	SENTATION OF A	AULTIPLE DE	PENDENT CLA	IM 📗	X42		OR	X84=		
	(Column 1)				+140: TOT ADDIT, FI	AI .	OR OR	+280= TOTAL		
Total Independent	CLAIMS REMAINING AFTER AMENDMENT	Minus	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE X\$ 9=	ADDI- TIONAL FEE		RATE	ADDI- TIONAI FEE	No Co
FIRST PRESE	NTATION OF MU	Minus LTIPLE DEP	*** ENDENT CLAIM	=	X42=	· .	1	X\$18=		<u> </u>
OR X84=										Q Q

* If the entry in column 1 is less than the entry in column 2, write '0' in column 3.

** If the "Highest Number Previously Paid For' IN THIS SPACE is less than 20, enter '20,"

The "Highest Number Previously Paid For' IN THIS SPACE is less than 3, enter '3."

ADDIT. FEE

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